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10/782,902	02/23/2004 RULE	705	3626	03191.000100.		
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** CONTINUING DATA *****						
** FOREIGN APPLICATIONS *****						
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/13/2004						
Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> DILEK B COBANOGULU/ Examiner's Signature	<input type="checkbox"/> Met after Allowance DBC Initials	STATE OR COUNTRY CA	SHEETS DRAWINGS 8	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
ADDRESS FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 UNITED STATES						
TITLE Method for payer access to medical image data						
FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		